

DO/EO BIBLIOGRAPHIC DATA ENTRY

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IA NUMBER: PCT/ IL98 / 00611 IA FILING DATE: 12 / 16 / 98
FAMILY NAME: BRAUN DELAY WAIVED (Y/N): Y
GIVEN NAME: ORI J DEMAND RECEIVED (Y/N): Y
PRIORITY CLAIMED (Y/N): N PRIORITY DATE: 00 / 00 / 00
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: 001/02171 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000
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APPLICATION TITLES:
SELF GATING PHOTOSURFACE

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CONFIRMATION NO. 8894

SERIAL NUMBER 09/868,405	FILING DATE 06/14/2001 RULE	CLASS 356	GROUP ART UNIT 2877	ATTORNEY DOCKET NO. 001/02171
APPLICANTS - Ori J. Braun, Tel-Aviv, ISRAEL; Gavriel J. Iddan, Haifa, ISRAEL; Giora Yahav, Haifa, ISRAEL;				
** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/IL98/00611 12/16/1998				
** FOREIGN APPLICATIONS *****				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY ISRAEL	SHEETS DRAWING 3	TOTAL CLAIMS 30
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 1		
ADDRESS William H Dippert Cowan Liebowitz and Latman 1133 Avenue of the Americas New York, NY 10036-6799				
TITLE Self gating photosurface				
FILING FEE RECEIVED 1058	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 8894

SERIAL NUMBER 09/868,405	FILING DATE 06/14/2001 RULE	CLASS 356	GROUP ART UNIT 2612	ATTORNEY DOCKET NO. 001/02171
APPLICANTS Ori J. Braun, Tel -Aviv, ISRAEL; Gavriel J. Iddan, Haifa, ISRAEL; Giora Yahav, Haifa, ISRAEL;				
** CONTINUING DATA ***** This application is a 371 of PCT/IL98/00611 12/16/1998				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/05/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a- d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials	STATE OR COUNTRY ISRAEL	SHEETS DRAWING 3	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 1
ADDRESS William H Dippert Cowan Liebowitz and Latman 1133 Avenue of the Americas New York ,NY 10036 -6799				
TITLE Self gating photosurface				
FILING FEE RECEIVED 1058	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	